

Name _____

Date of Birth _____ CRN _____

Address _____

I give permission for:

the Australian Government Department of Human Services (the Department) to make a Regular Deduction from my Centrelink benefit and pay this amount to the Women's Housing Company, CRN 555 025 867 H, for **RENT**:

\$ _____ <amount>, each fortnight week, commencing from _____ <start date>

deducted from my _____ <payment type>

I authorise the Women's Housing Company (WHC) to:

- disclose my information to the Department for the purposes of checking my account, billing or reference number, and amount I want to pay, and reconciling my payment Deduction details, and for the purposes of the *Privacy Act 1988*
- give the Department my correct account, billing or reference number if required
- change my rental Deduction from time to time to ensure my housing payments are met, not including arrears payments, unless I provide new authorisation to do so

I understand that:

- I can change or cancel my Deduction at any time, however I will be required to make alternative arrangements to pay my **Rent** if I am continuing my rental agreement or if I have any rent owing
- if I cancel my Deduction, I will be required to give new consent before the WHC can restart a Deduction
- if I fall behind in my rent, the WHC cannot increase my Deduction to catch-up until I provide new authorisation

OPTIONAL (for rent arrears):

I request that an additional Regular Deduction be made for rent arrears. Once the target amount or end date is reached, the Deduction amount will then reduce to my agreed ongoing Regular Deduction

\$ _____ <amount>, each fortnight week, until \$ _____ <target amount>

OR _____ <end date>, from my _____ <payment type>

I understand that:

- this consent, once signed, is effective for the services indicated, and only for the period that I am a Customer of the Women's Housing Company
- every time the WHC provides information to the Department for Centrepay, I will be advised in writing
- the WHC will maintain a record of my consent for a minimum of two years beyond the date I cease to be a Customer
- further information about Centrepay can be found online at humanservices.gov.au/centrepay

I hereby declare that I have read (or had read to me) and understand the services described above and I provide my informed consent and authority as indicated

Your signature _____ Date _____